FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SEC Mail Mail Processing Section

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

MAR 0 9 2009 SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB NUMBER: 3235-0076 Expires: March 31, 2009 Estimated average burden hours per response.......16.00

OMB APPROVAL

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| Prefix | Serial |
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| Date R | eceived |
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Washington, DC

| 460 | | |
|--|---|---|
| Name of Offering \(^1\) (\(\frac{1}{2}\) Check if this is | s an amendment and name has changed, and indicate chang | (e.) |
| Offering of Preferred Shares in Silver | r State REIT Inc. | |
| Filing Under (Check box(es) that apply |): □ Rule 504 □ Rule 505 ☒ Rule 506 □ | Section 4(6) ULOE |
| Type of Filing: New Filing | ☐ Amendment | |
| | A. BASIC IDENTIFICATION DATA | |
| 1. Enter the information requested about | at the issuer | |
| Name of Issuer (Check if this is an | amendment and name has changed, and indicate change.) | |
| Silver State REIT Inc. | | |
| Address of Executive Offices | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| c/o Phillips Edison & Company, Ltd | , 11501 Northlake Drive, Cincinnati, Ohio 45249 | (513) 554-1110 |
| Address of Principal Business Operatio | ns (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| (if different from Executive Offices) | | |
| Dispersion of the second | | |
| Brief Description of Business | | |
| Real Estate Investments | | |
| | | |
| Type of Business Organization | | Other (please spe 09035121 |
| □ corporation | | other (please spe. |
| □ business trust | ☐ limited partnership, to be formed | |
| Actual or Estimated Date of Incorporation or Organization of Incorporation or Organization | | Year 8 Actual □ Estimated Or State: D SQUESTIMATE OF STATE D SQUESTIMATE OF STATE O |
| | | - 412 04 W |
| GENERAL INSTRUCTIONS | | MAROF |
| Federal: | | ""CUNK |
| Who Must File: All issuers making an | offering of securities in reliance on an exemption under Re | gulation D or Section 4(6), 17 CFR-33/GWID |

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated an the filing of a federal notice.

SEC 1972 (6-02) 1 of 8

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

• Each promoter of the issuer, if the issuer has been organized within the past five years;

- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | ☐ Promoter | ☑ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
|---|---------------------|--------------------------------|---------------------|------------|--------------------------------------|
| Full Name (Last name first, if inc | lividual) | | | | |
| Phillips Edison Shopping Cente | er Fund IV REIT | LLC | | | |
| Business or Residence Address | (Numb | er and Street, City, State, 2 | (ip Code) | <u>-</u> | |
| Full Name (Last name first, if individual) Phillips Edison Shopping Center Fund IV REIT LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Phillips Edison & Company, Ltd., 11591 Northlake Drive, Cincinnatt, Ohio 45249 Check Box(es) that Apply: | | | | | |
| | | | | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if inc | dividual) | | | | |
| Phillips, Michael C. | | | | | |
| Business or Residence Address | (Numb | er and Street, City, State, 2 | Lip Code) | | |
| c/o Phillips Edison & Company | y, Ltd., 11501 Nort | thlake Drive, Cincinnati, | Ohio 45249 | | |
| | | | | □ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | |
| Edison, Jeffrey S. | | | | | |
| | (Numb | er and Street, City, State, 2 | Zip Code) | • | |
| c/o Phillips Edison & Company | y, Ltd., 11501 Nort | thlake Drive, Cincinnati, | Ohio 45249 | | |
| | | | | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if in | đividual) | | | - | |
| Addy, R. Mark | | | | | |
| Business or Residence Address | (Numb | per and Street, City, State, 7 | Zip Code) | | |
| c/o Phillips Edison & Company | y, Ltd., 11501 Nor | thlake Drive, Cincinnati, | Ohio 45249 | | |
| | | | | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | · |
| Martz, Raymond D. | | | | | |
| Business or Residence Address | (Numb | per and Street, City, State, 7 | Zip Code) | | |
| c/o Phillips Edison & Compan | y, Ltd., 11501 Nor | thlake Drive, Cincinnati, | Ohio 45249 | | |
| | | | | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | |
| | | | | | |
| Business or Residence Address | (Numb | per and Street, City, State, 2 | Zip Code) | | |
| | | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | |
| Business or Residence Address | (Numb | per and Street, City, State, | Zip Code) | | . " |
| | | | | | |

| | • | | _ | B. INFO | ORMATIO | N ABOUT | OFFERI | NG | | | | |
|---|--|---|--|-------------------------|----------------------------|--------------|-----------------------------|-----------------------------|------------------------------|----------------------------|--------------------------|--------------|
| | | | • • • • | | | | . :- A.: 0 | · | | | | No |
| 1. Has the iss | uer sold, oi | does the is | suer intend | to sell, to r | ion accredit | ed investor | s in this off | ering / | | | 0 (| 3 |
| | | | Ans | wer also in | Appendix, | Column 2, | if filing und | ler ULOE. | | | | |
| 2. What is the | minimum | investment | that will be | e accepted t | from any in | dividual? | | | | | \$ <u>500.00</u> | |
| | | | | | | | | | | | res 1 | No |
| 3. Does the o | ffering pen | mit joint ow | nership of | a single uni | it? | | | | | | Ø (| |
| 4. Enter the in remuneration agent of a bro persons to be | for solicita ker or deale listed are a | tion of purc er registered ssociated pe | hasers in co I with the S ersons of su | nnection w EC and/or | vith sales of with a state | securities i | n the offeri st the name | ng. If a per of the brok | son to be li er or deale: | sted is an a r. If more | ssociated than five (| person or |
| Full Name (La | ast name fi | rst, if indivi | dual) | | | | | | | | | |
| Business or R | esidence A | ddress (Nu | mber and St | treet, City, | State, Zip C | Code) | | | | | | |
| | | | <u>-</u> . | | | | | | | | | |
| Name of Asso | ciated Bro | ker or Deale | er | | | | | | | | | |
| States in Whi | -L D ' | Satural Unit C | 'aliais-4 | 1ma.m.d= a= 1 | Calinit D | hagaer | | | _ | | | |
| | | or check inc | | | Soucit Purc | nasers | | | | | All States | s |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| (IL) | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | (MI) | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [[[| [NM] | [NY] | [NC] | [ND] | (OH) | [OK] | [OR] | (PA |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | (PR) |
| Full Name (L | ast name fi | rst, if indivi | duai) | | | | | | | | | |
| | | | | | | | | | | | | |
| Business or R | esidence A | ddress (Nu | mber and S | treet, City, | State, Zip C | Code) | | | | | | |
| | | | | | | | | | | - | | |
| Name of Asso | ociated Bro | ker or Deal | er | | | | | | | | | |
| States in Whi | ch Person I | Listed Has S | Solicited or | Intends to | Solicit Purc | hasers | | | | | <u></u> - | |
| • | All States" | or check in | dividual Sta | ites) | | | | | | | All State | |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| (MT) | (NE) [SC] | (NV) (SD) | (NH) (TN) | [NJ] [TX] | (MM) [TU] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] |
| [RI] Full Name (L | | | | [IX] | נטון | [VI] | [VA] | [WA] | [** *] | [w ij | [** 1] | |
| run Name (L | ast name n | 154 11 1114171 | iduai) | | | | | | | | | |
| Business or R | Residence A | ddress (Nu | mber and S | treet, City, | State, Zip C | Code) | | | | | | |
| | | | | | | | | | | | | |
| Name of Asse | ociated Bro | ker or Deal | er | | | | | | , | | | |
| | | | | | | | | | | | | |
| States in Whi | | Listed Has S or check in | | | Solicit Purc | hasers | | | | | All State | ·s |
| (Check | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [KL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | (MS) | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [ОН] | [OK] | (OR) | [PA |
| [DI] | 1001 | te D) | tTNI1 | (TV) | רו וידיו | [1/7] | [NA] | [WA] | mwi | twn | ru/V1 | rop1 |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange | | | | | |
|----|---|------|---------------------|-------------|---------------|-----------------------------------|
| | and already exchanged. Type of Security | | egate ring Price | | | Already Sold |
| | Debt | \$ 0 | | | \$ (|) |
| | Equity | | 00.00 | | | 00.00 |
| | □ Common □ Preferred | | | | | |
| | Convertible Securities (including warrants) | s | 0 | | S | 0 |
| | Partnership Interests | | 0 | | | 0 |
| | Other (Specify) | | 0 | | | 0 |
| | Total | | 000.00 | | | 00.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | umber vestors | | Dolla | ggregate ir Amoun Purchases |
| | Accredited Investors | _10 |)6 | | \$ <u>53,</u> | 00.00 |
| | Non-accredited Investors | _0 | | \$ <u>0</u> | |) |
| | T 1/2 (T) 1 D 1 (D) 1 | | | | • | |
| | Total (for filings under Rule 504 only) | | | | | |
| 3. | Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | | | | |
| | Type of offering | | ype of ecurity | | | ar Amoun Sold |
| | Rule 505 | | | | - | |
| | Regulation A | | | | \$ | |
| | Rule 504 | | | | \$ | |
| | Total | | | | \$ | |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | | | |
| | Transfer Agent's Fees | | | | \$ | |
| | Printing and Engraving Costs | | | | \$ | |
| | Legal Fees | | | Ø | \$ <u>5,1</u> | 66,00 |
| | Accounting Fees | | | 0 | \$ | |
| | Engineering Fees | | | 0 | \$ | |
| | Sales Commissions (specify finders' fees separately) | | | | \$ | |
| | Other Expenses (identify) Blue Sky Fees | | | × | \$ <u>2,3</u> | 35.00 |
| | Total | | | × | \$ <u>7,5</u> | 01.00 |

| | b. Enter the difference between the aggregate off 1 and total expenses furnished in response to P "adjusted gross proceeds to the issuer." | art C - Questio | n 4.a. This differenc | e is the | | | | \$45,499.00 |
|----|--|--|--|---|-------|--|-------|---------------------|
| 5. | Indicate below the amount of the adjusted gross pused for each of the purposes shown. If the amou estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth | proceeds to the ent for any purp late. The total | issuer used or propo- ose is not known, fu of the payments liste | sed to be rnish an d must equal | | Payments to Officers, Directors, & | | Payments To |
| | Salaries and fees | | | | | Affiliates \$ | _ | Others |
| | Purchase of real estate | | | | | \$ \$ | | |
| | Purchase, rental or leasing and installation of | | | | | \$ \$ | | |
| | • | • | | | | \$ \$ | | |
| | Construction or leasing of plant buildings and facilities | | | | | | W | Ψ |
| | offering that may be used in exchange for the | assets or secur | rities of another | | _ | ¢. | _ | ¢. |
| | issuer pursuant to a merger) | | | | | \$ | | |
| | Repayment of indebtedness | | | | | \$ | | |
| | Working Capital | | | | | \$ | | \$ <u>45,499.00</u> |
| | Other (specify): | | | | | \$ | | \$ |
| | | | | | _ | ¢ | _ | c |
| | 0.1 | | | | | \$ | | |
| | Column Totals | *************************************** | | *************************************** | u | \$ | 23 | \$ <u>45,499.00</u> |
| | Total Payments Listed (Column totals added) | · | | | | ⊠ \$ <u>4</u> | 5,499 | <u>2.00</u> |
| _ | | D. FEDE | CRAL SIGNATURE | 2 | | <u></u> | | |
| | ne issuer has duly caused this notice to be signed b | | | | ce is | filed under Rule | - 505 | S the |
| | following signature constitutes an undertaking by of its staff, the information furnished by the issue | the issuer to fi | amish to the U.S. Sec | curities and Exchai | ige C | Commission, upo | | |
| ls | suer (Print or Type) | nature | | | | Date | | |
| Si | Iver State REIT Inc. | f. my | abled | 0/ | _ | 3 5 | | 9 |
| N | ame of Signer (Print or Type) Tit | le of Signer P | rint or (ype) | 7) | | | | |
| R | . Mark Addy Vi | ce President a | nd Secretary | 1/ | | | | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END